Analysis of LPN IV Scope of Practice and Ability to perform ACLS

201 KAR 20:490

ACLS

Section 3. Supervision	and the second s	the property of the property of the second of the second of
1.	Under Direction and supervision of RN, ARNP, MD or dentist	RN may not be present in building – Long Term Care
2.	Stable patient, supervisor does not have to be in immediate vicinity	Not Applicable
3.	Supervisor physically present in immediate vicinity and immediately available when: (a) patient condition is or becomes critical, fluctuating, unstable or unpredictable (b) if IV medications or fluids are administered by push or bolus administration, except for saline or heparin to	RN may not be present in building – Long Term Care BLS, Code, 911, AED(if present in facility) can be initiated Emergency equipment to pt room AED can be applied CPR can be started after AED read and shock
	maintain patency of IV access device (c) Patient develops sign & symptoms of IV catheter-related infection, venous thrombosis or central line catheter occlusion (d) Patient receiving blood, blood components or plasma volume expanders (e) Patient receiving dialysis or hemodialysis	
Section 5		
Functions that may be		
performed except as		·
limited by Section 6		
1.	Calculation and adjustment of flow rate on all IV infusions	
2,	Observation and reporting of subjective and objective signs of adverse reactions to any IV admin. And initiate appropriate interventions	
3.	For all IV access devices	
V.	(a) Administration of IV fluids	
	and medications via central	
	venous and peripheral access	
	devices as permitted by this	
	Section and prohibited by	
	Section 6 of this	
	Administrative Regulation	-
	(b) Performance of site care	
	and maintenance that	
•	includes:	
	Monitor access site and	ŀ

	infusion equipment 2. Change administration set, including add-on device and tubing 3. Flushing 4. Change site dressing (c) Discontinuance of medication or fluid infusion (d)Conversion of a continuous infusion to an	
	intermittent infusion	
4.	Insertion or removal of a peripheral access device	Could start peripheral IV
5.	Administration, monitoring and discontinuance of blood, blood components and plasma volume expanders	
6.	Administration of IV medications and fluids that are mixed and labeled by an RN, ARNP, MD, dentist or pharmacist or commercially prepared	
7.	Mixing and administration via push or bolus route of any of the following classifications of medications	First line drugs, Epi, Vasopressors, atropine, antiarrythmics can not be pushed by LPN
	(a) Analgesics	9 10 10 14 14 14 14 14 14 14 14 14 14 14 14 14
	(b) Antiemetics	If and a second
,	(c) Antagonistic agents for analgesics	If overdose of analgesics and order given, can administer this
	(d) Diuretics	
	(e) Corticosteroids	
	(f) Saline or heparin to maintain patency of an IV access device	
8.	Administration of glucose to patients fourteen (14) years of age or older vial push or bolus	With standing order, D50 could be pushed if related to low blood sugar
9.	Administration, monitoring and discontinuance of IV medications and fluids given via a PCA system	· ·
10.	Administration, monitoring, and discontinuance of parenteral nutrition and fat emulsion solutions	
11.	Dialysis	
12.	Collection of blood specimens form a peripheral IV access device	
13	Removal of a noncoring needle from an implanted venous port	
14.	Titration of intravenous	

201 KAR 20:490

ACLS

	analgesic medications for	
	hospice patients	
15.	Administration of peripheral	Could administer
15.	Administration of peripheral	Codid administer
	IV medications via a	
	volumetric control device	
16.	Administration of IV	Could administer
	medications or solutions via a	
	ready to mix IV solution	
	infusion system	
17.	Aspiration of a central venous	
17.	catheter to confirm patency	·
	via positive blood return	
	via positive blood return	
Section 6		
Functions that Shall Not		
be Performed		
1.	Administration of tissue	·
	plasminogen activators,	
	immunoglobulin,	·
	antineoplastic agents or	
	investigational drugs	
2.	Accessing of a central venous	
۷.		
	access device used for	
	hemodynamic monitoring	
<u>3,</u>	Administration of medications	
	or fluids via arterial lines or	
	implanted arterial ports	
4.	Administration of medications	
	via push or bolus routes	•
•	except as permitted by	
	Section 5(7) or (8) of this	•
	administrative regulation	
F	Administration of a fibrinolytic	
5. .	·	
	agent to declot any IV access	
	device	
-6.	Administration of medications	
	requiring titration, except as	
	permitted by Section 5 (14)	
7.	Insertion or removal of any IV	
	access device, except as	
	permitted by Section 5(4) or	
	(13)	
0	Accessing or programming an	
8.		
	implanted IV infusion pump	
9.	Administration of IV	
	medications for procedural	
·	sedation, moderate sedation	
	or anesthesia	
10.	Administration of fluids or	
	medications via an epidural,	
	intrathecal, intraosseous or	
	umbilical rout or via a	
	}	
	ventricular reservoir	
11.	Administration of medications	
	or fluids via an arteriovenous	
	fistula or graft except for	
	dialysis	
12.	Performance of the repair of a	
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13.	Mixing of any medications other than those listed in Section 5(7)	
14.	Insertion of noncoring needles into an implanted port	
15.	Performance of therapeutic phlebotomy	

Reference:

America Heart Association. (2006) *Advanced Cardiovascular Life Support* (professional). South Deerfield, MA: Channing Bete Company.

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